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|--|---|---|-------------------------------------|-------------------------------|-------|--------------------------|--------------------------------|----|--------------------------|----------------------------------|----|--------------------------|---------------------------------|----|--------------------------|---------------------------------|----|--------------------------|---|--|--------------------------|---|--|--------------------------|--|--|--------------------------|---|--|-------------------------------------|---|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>  |   | Docket Number (Optional)<br>021946-000310US |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
|  <p>In re Application of HERMAN DEWEERD et al.<br/>     Application Number 09/674,585 Filed April 16, 2002<br/>     For ELECTRO-OPTICAL MECHANICAL INSTRUMENT<br/>     Art Unit 2872 Examiner Joshua L. Pritchett</p>   |   |   |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr><td><input checked="" type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$110</td></tr> <tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ .</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>A check in the amount of the fee is enclosed.</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Payment by credit card. Form PTO-2038 is attached.</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>The Director has already been authorized to charge fees in this application to a Deposit Account.</td><td></td></tr> <tr><td><input checked="" type="checkbox"/></td><td>The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.</td><td></td></tr> </table> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</li> <li><input checked="" type="checkbox"/> attorney or agent of record.. Registration Number 28,572</li> <li><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</li> </ul> <p>Registration number if acting under 37 CFR 1.34(a). _____</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>July 6, 2004</p> <p>Date</p> <p><i>David Slone</i></p> <p>Signature</p> <p>David N. Slone, Reg. No. 28,572</p> <p>Typed or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p> |   |   | <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$110 | <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ | <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$ | <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ | <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ | <input type="checkbox"/> | Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ . |  | <input type="checkbox"/> | A check in the amount of the fee is enclosed. |  | <input type="checkbox"/> | Payment by credit card. Form PTO-2038 is attached. |  | <input type="checkbox"/> | The Director has already been authorized to charge fees in this application to a Deposit Account. |  | <input checked="" type="checkbox"/> | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. |  |
| <input checked="" type="checkbox"/>  | One month (37 CFR 1.17(a)(1))   | \$110                                       |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | Two months (37 CFR 1.17(a)(2))  | \$  |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | Three months (37 CFR 1.17(a)(3))  | \$  |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | Four months (37 CFR 1.17(a)(4))   | \$  |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | Five months (37 CFR 1.17(a)(5))   | \$  |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ . |   |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | A check in the amount of the fee is enclosed.   |   |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | Payment by credit card. Form PTO-2038 is attached.  |   |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input type="checkbox"/>   | The Director has already been authorized to charge fees in this application to a Deposit Account.   |   |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |
| <input checked="" type="checkbox"/>  | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.           |   |                                     |                               |       |                          |                                |    |                          |                                  |    |                          |                                 |    |                          |                                 |    |                          |   |  |                          |   |  |                          |  |  |                          |   |  |                                     |   |  |

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